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APPLICANTS

Yong Woo Kim, Rochester, NY;

** CONTINUING DATA *****

None *RB*

** FOREIGN APPLICATIONS *****

None *RB*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** SMALL ENTITY **

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: _____	NY	3	27	6

ADDRESS

Eugene S. Stephens
Eugene Stephens & Associates
56 Windsor Street
Rochester, NY
14605

TITLE

Spring pack

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